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## APPLICANTS

Michael D. Macklin, Madison, WI;

Deborah L. Fuller, Madison, WI;

**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/119,515 02/09/1999  
 and claims benefit of 60/161,699 10/26/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

**\*\* 04/11/2000**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>mg</i> Initials	STATE OR COUNTRY WI	SHEETS DRAWING 17	TOTAL CLAIMS 55	INDEPENDENT CLAIMS 4
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## ADDRESS

22428  
 FOLEY AND LARDNER  
 SUITE 500  
 3000 K STREET NW  
 WASHINGTON , DC  
 20007

## TITLE

Mycobacterium tuberculosis immunization

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